



Flathead City-County Board of Health

1035 First Ave. West Kalispell, MT 59901
(406) 751-8101 FAX 751-8102
www.flatheadhealth.org

Community Health Services
751-8110 FAX 751-8111
Environmental Health Services
751-8130 FAX 751-8131
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751-8150 FAX 751-8151
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751-6800 FAX 751-6807
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FCEMS Advisory Committee

Meeting Minutes of March 31, 2008

6:00 – 8:00 pm

Health Department Conference Room – Earl Bennett Building

Summary

Most of this meeting was spent addressing agenda item 3 regarding gaps in ambulance service throughout the valley with wide ranging discussions. At the end of the meeting a status update on the new 911 dispatch system was given by Mark Peck. Attendees were reminded that the last two regulations were provided to them in their agenda packet as final drafts.

Action Items:

1. Everyone involved with Flathead County EMS is encouraged to provide feedback, suggestions, proposals, and plans to address response and transport issues. The FCEMS office (Joe, Marty, Gary) will compile this input and work out methods to summarize it and present it to the Advisory Committee in an organized way.
2. The regulations will be reformatted for “codification” and sent to the BOH for approval.
3. The nominations and applications for the Advisory Committee voting representatives will be sent to the BOH for selection and appointment.

Attendees:

Scott Alexander	Whitefish Fire
Nancy Askew	Board of Health
Robert Bates	FCEMS Medical Director
Art Bielz	Smith Valley Fire
Marty Boehm	FCEMS
Richard Briles	KRMC
Randy Brodehl	Kalispell Fire
James Brower	Marion Fire
Chuck Curry	ALERT
Mary Granger	Lakeside QRU
Neil Heino	KRMC
Kathaleen Krass	Olney Ambulance
Gary Mahugh	Creston Fire
Ken McFadden	NVH
Wayne Miller	Board of Health
Tracy Norred	Bigfork Ambulance
Tonya Passwater	FC Health Dept.
Mark Peck	Office of Emergency Services
Joe Russell	FC Health Officer
Lela Sistok	West Valley Fire
Doug Smith	Bigfork Ambulance; BOH
Gary Solomon	FCEMS
Wendy Stefaniak	Badrock Fire
Eda Taylor	Bigfork Ambulance
Bill Tidwell	Creston Fire
Lance Westgard	Three Rivers Ambulance
Craig Williams	Evergreen Fire
Turner Askew	

Meeting Agenda

1. Review and approve the latest, final draft FCEMS regulations:
 - 2 - EMS Advisory Committee
 - 10 - Levels of Prehospital Care in Flathead County
2. Finalize applications and nominations for FCEMS Advisory Committee voting members.
3. Discuss gaps in ambulance service within the Flathead valley.
4. Open forum:

Assess the current direction of the advisory committee.

Future directions and ideas from members for EMS needs, policies, or other issues affecting EMS.

Meeting Minutes

Joe Russell opened the meeting with agenda item #3 in order to notify everyone about a Board of Health meeting topic dealing with countywide ambulance service. This issue was addressed in the recent BOH meeting and resulted in “not much” or “very little” support for the idea. One focus has been “a higher level of transport” for the Creston and Lakeside regions. Response time targets being considered are five minutes for BLS and 10 minutes for ALS.

Discussion proceeded about transport and response times with questions about when to “start the clock”: at page-out or at vehicle departure from station. This was not clarified.

There was a discussion about reimbursement with the comment that if you transport, you may bill for that service.

The next discussion regarded the amount of time volunteers would commit to calls involving transport compared to response-only (transport handed over to another agency). Comments were made about the possible long-term consequences to volunteer response levels, i.e. decreasing, with the increased time commitment with more transport related calls.

A draft proposal, “EMS Volunteer Transport Unit Reimbursement Policy” was distributed for review and comment.

Brodehl voiced concern about the intent with the focus on volunteer transport regarding no options for using Kalispell Fire Department. Comments about adverse financial impact on KFD and other transport agency operations reflected concerns about intended and unintended consequences of the short-term program. Russell re-stated that this was a draft proposal and that no options are being intentionally excluded.

Sistok brought up the relative importance of rapid BLS response versus rapid ALS transport. Arguments both ways were made showing that the medical situation uniquely determines which case may be most important.

The Department of Labor restrictions were brought up regarding paying an employee for volunteering time for the same work activities. A guideline was presented where a volunteer may be paid up to 20% of what an employee would be paid to perform the same activities.

Russell stated that FCEMS has evaluated the economics of providing full time ambulance service in specific regions, Lakeside for example, and determined that it is not affordable. They looked at various staffing and economic models to provide ambulance services.

Alexander mentioned the growing conflict with EMS response when inter-facility transports are underway. Since these are more reliable for frequency and reimbursement, they may conflict with EMS readiness and response.

Bates suggested focusing on training EMT-Basic with Endorsements for responders in outlying areas before addressing transport issues.

Peck suggested evaluating the countywide problem with a dedicated (ala full time), objective person, i.e. a contractor or other individual possibly outside the county EMS system. Also, discussing and evaluating other county EMS situations would be informative and helpful towards developing options.

Heino made the point that the overall model should account for the time from the incident to the patient’s arrival at the hospital as compared to response time to the incident.

Boehm expressed the desire to act. Simply try a plan and evaluate it. The options are to do nothing, by conscious choice or by continuous debate, or to select a plan, execute it, evaluate, and learn from it for the next steps. Additionally, the feeling is that it will be very difficult to project the outcome of different plans without actually trying something.

Brodehl added to that sentiment with a suggestion to ask for RFPs from the existing services. One critique of this was the formal and legal issue of an RFP, but the intention of getting thoughtful feedback and suggestions from the services in the county was supported.

There was discussion about problems with Flathead County supporting paid services versus volunteers.

Bielz raised the question about a county analysis and plan after the end of October (per the draft plan) regarding the financial impact on the transporting agencies.

Brodehl noted that the overall problem needs to be better defined. Mahugh commented not to forget that customer (patient) care is the first priority.

Smith suggested focusing on education as a primary factor in supporting and providing incentive to volunteers.

Comments were discussed about what levels of responder care led to better patient outcomes, be it ALS or Basic endorsements.

Taylor made the point that the Flathead valley EMS is primarily a volunteer system and that the answer to our problems will probably not be more paramedic volunteers.

Miller asked, in general, how to incentivize volunteers to improve the system. Brower responded that paying volunteers does not sustain itself.

Curry made the point, again, to define the issue(s). In this case, specifically, “better transport for Lakeside and Creston areas”. Many other variations of this definition were then offered.

Peck revisited his previous suggestion whereby the entire county-wide system ought to be reviewed by one full-time person to address the problems. Additionally, an all volunteer committee will not solve this problem.

Smith requested to have Joe Brenneman involved. (Joe is notified and invited to each Advisory Committee meeting).

Boehm noted that the county commissioners have previously asked Joe Russell to solicit RFPs for the problem(s) and that, after evaluation, the definition of the problem was unable to be expressed in a way meaningful to an RFP. This led to the evaluation work by Marty Boehm.

Requests for feedback and input from anyone were made to address the definition of the problems, analysis and suggested solutions. These should be directed to FCEMS - Joe Russell, Marty Boehm, or Gary Solomon.

Discussions moved to continuing requests for funds from the Board of Health and Askew stated that they would be addressed next week. Smith requested that the agencies include their profit and loss information with their funding requests to help the board evaluate each situation.

It was acknowledged that the Board of Health needs to clarify the financial funding situation so the agencies/units may better understand their status.

Mark Peck gave a brief status update on the new dispatch system. PowerPhone is favored for the EMD system as being more flexible and applicable to our county system. This system will lead to the need for newly defined protocols for the county. Extensive training will be provided. It was noted that the current system is a more urban type system and simply has not been implemented all that well.

The agenda items # 1 and 2 were briefly mentioned. The last two regulations numbered 2 and 10 were provided to everyone in their meeting agenda packet as final drafts and will be sent on to the next step for codification. The nominations and applications for voting members of the advisory committee were also listed and included in the packet. These will be sent to the Board of Health for selection and appointment.